

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		01/04/2000
O.I.P.E. CLASSIFIER		49	11/2/00
FORMALITY REVIEW	<i>1/8</i>	71480	2-7-00
RESPONSE FORMALITY REVIEW	<i>11</i>	<i>11</i>	9-11-00

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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